POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	FN	32	1/2
FORMALITY REVIEW	1		
RESPONSE FORMALITY REVIEW	1,	1	
_	AB	#671.33	1-24-66

INDEX OF CLAIMS

Rejected	N	Non-elected
= Allowed	1	Interference
(Through numeral) Canceled	Α.	Appeal
÷ Restricted	0	Objected

Claim	Date	Claim	Date	Claum Date
18 4 12 b		Final		Final
Pinai Program				14. O
17111		51		101
2 13 1		52 53		103
(a) 1		54		104
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		56		106
6 1 1 1		57		(107)
8777		58		108
9///		59		1091
10		60		110-
11		61		111
12		62		113
13		63	+	1114
14		64	++++++	115
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16	1 - 1 - 1 - 1 - 1 - 1	67	+	1117
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20	╎┤╶┤╶┤╸┞╸┞ ╶╂╶┤	71		121
21	╿╸╏╸╏ ╶╏	72		122:
22	┦╸ ┼╌┼╌┼╶┼╌┼═┤	73		123
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30	 	81	+	131
31		82		132
32	┶┼┵┼┽┽┾╌	83		133
33	╽╸╽╸┩╺┞╸┞	84		134
34	╎╎┤ ┪╅┼	85		136
35	┼┼┼┼┼	86		137
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49	┸	100		150

If more than 150 claims or 10 actions staple additional sheet here

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